173

# CLAIMS ONLY

| Application Number | Filing Date |
|---|---|
| 09/738,234 | |

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | | Indep | Depend | Indep | Depend | Indep | Depend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Indep | Depend | Indep | Depend | Indep | Depend | | | | | | | | |
| 1 | 1 | | 1 | | | | 51 | | | | | | |
| 2 | | / | | | | | 52 | | | | | | |
| 3 | | / | | | | | 53 | | | | | | |
| 4 | | / | | | | | 54 | | | | | | |
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| 7 | | / | | | | | 57 | | | | | | |
| 8 | | / | | | | | 58 | | | | | | |
| 9 | | / | | | | | 59 | | | | | | |
| 10 | 1 | | | | | | 60 | | | | | | |
| 11 | | / | | | | | 61 | | | | | | |
| 12 | | / | | | | | 62 | | | | | | |
| 13 | | / | | | | | 63 | | | | | | |
| 14 | | / | | | | | 64 | | | | | | |
| 15 | 1 | | | | | | 65 | | | | | | |
| 16 | | / | | | | | 66 | | | | | | |
| 17 | | / | | | | | 67 | | | | | | |
| 18 | | / | | | | | 68 | | | | | | |
| 19 | | / | | | | | 69 | | | | | | |
| 20 | 1 | | | | | | 70 | | | | | | |
| 21 | | / | | | | | 71 | | | | | | |
| 22 | | / | | | | | 72 | | | | | | |
| 23 | | / | | | | | 73 | | | | | | |
| 24 | | / | | | | | 74 | | | | | | |
| 25 | | / | | | | | 75 | | | | | | |
| 26 | | | 1 | | 1 | | 76 | | | | | | |
| 27 | | | | / | | / | 77 | | | | | | |
| 28 | | | | / | | / | 78 | | | | | | |
| 29 | | | | / | | / | 79 | | | | | | |
| 30 | | | | / | | / | 80 | | | | | | |
| 31 | | | | / | | / | 81 | | | | | | |
| 32 | | | | / | | / | 82 | | | | | | |
| 33 | | | 1 | | 1 | | 83 | | | | | | |
| 34 | | | | / | | / | 84 | | | | | | |
| 35 | | | | / | | / | 85 | | | | | | |
| 36 | | | | / | | / | 86 | | | | | | |
| 37 | | | | / | | / | 87 | | | | | | |
| 38 | | | | / | | / | 88 | | | | | | |
| 39 | | | 1 | | 1 | | 89 | | | | | | |
| 40 | | | | | | / | 90 | | | | | | |
| 41 | | | | | | | 91 | | | | | | |
| 42 | | | | | | | 92 | | | | | | |
| 43 | | | | | | | 93 | | | | | | |
| 44 | | | | | | | 94 | | | | | | |
| 45 | | | | | | | 95 | | | | | | |
| 46 | | | | | | | 96 | | | | | | |
| 47 | | | | | | | 97 | | | | | | |
| 48 | | | | | | | 98 | | | | | | |
| 49 | | | | | | | 99 | | | | | | |
| 50 | | | | | | | 100 | | | | | | |
| Total Indep | 4 | | 4 | | 4 | | Total Indep | | | | | | |
| Total Depend | 21 | | 11 | | 11 | | Total Depend | | | | | | |
| Total Claims | 25 | | 15 | | 15 | | Total Claims | | | | | | |

# CLAIMS ONLY

| | |
|---|---|
| **Application Number** 09/758,234 | **Filing Date** |
| **Applicant(s)** | |

* May be used for additional claims or amendments

| CLAIMS | C | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | | Indep | Depend | Indep | Depend | Indep | Depend |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | Indep | Depend | Indep | Depend | Indep | Depend | | | | | | | | |
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| Total Indep | 1 | | 1 | | 1 | | | Total Indep | | | | | | |
| Total Depend | 4 | | 4 | | 8 | | | Total Depend | | | | | | |
| Total Claims | 5 | | 5 | | 9 | | | Total Claims | | | | | | |

| CLAIMS ONLY | | Application Number 09/738,234 | | Filing Date | |
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| | | Applicant(s) | | | |

* May be used for additional claims or amendments

| CLAIMS | | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | | | • | | • | | • | |
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| | Indep | Depend | Indep | Depend | Indep | Depend | | Indep | Depend | Indep | Depend | Indep | Depend |
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| 47 | | | | | | | 97 | | | | | | |
| 48 | | | | | | | 98 | | | | | | |
| 49 | | | | | | | 99 | | | | | | |
| 50 | | | | | | | 100 | | | | | | |
| Total Indep | 2 | | | | | | Total Indep | | | | | | |
| Total Depend | 7 | | | | | | Total Depend | | | | | | |
| Total Claims | 9 | | | | | | Total Claims | | | | | | |